4274

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 169

Co. Registrar's No. 350

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of Globe

Town of or City of Globe

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Melvin Goeglein

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES ~~NO~~

Sex of Child: Male

Twin, Triplet or other: and Number in order of birth:

Legitimate? Yes

Date of Birth: June (Month) 20 (Day) 1920 (Yr.)

FATHER	MOTHER
Full Name: William Goeglein	Full Maiden Name: Myrtle Johnson
Residence: Globe, Arizona	Residence: Globe, Arizona
Color or Race: White	Color or Race: White
Age at last Birthday: 46 Years	Age at last Birthday: 35 Years
Birthplace: Fort Wayne, Indiana	Birthplace: Topeka, Kansas
Occupation: Chemist	Occupation: Housewife

Number of child of this Mother: 4

Number of Children, of this mother, now living: 2

Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on June 20 1920, at 12 30 A. M.

*When there is no attending physician or midwife, then the householder should make this return.

Signature: Alvin Kirmse M.D.

Attending physician, ~~midwife, householder~~.*

Given or Christian name added from a supplemental report ..... 191..

Address: Globe, Arizona

Filed 6/25 1920

B. G. Fox

LOCAL REGISTRAR.

475-620-415

COUNTY REGISTRAR.

Filed 7-1 1920

A True Copy

B. G. Fox

COUNTY REGISTRAR.

... midwife with each local Registrar within 5 days after birth.